

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09742288

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		19	<input type="checkbox"/>
FOR	12/22 00	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS		19 minus 20 = 0	<input type="checkbox"/>
INDEPENDENT CLAIMS		2 minus 3 = 0	<input type="checkbox"/>
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A	01/24/05	(Column 1)	(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total • 19	Minus .. 20	= 0
INDEPENDENT				
		Independent • 2	Minus ... 3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY **OTHER THAN**
TYPE **OR** **SMALL ENTITY**

RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X40=	<input type="checkbox"/>	OR X80=	<input type="checkbox"/>
+135=	<input type="checkbox"/>	OR +270=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	OR TOTAL	710

SMALL ENTITY **OTHER THAN**
OR **SMALL ENTITY**

RATE	ADDI- TIONAL FEES	RATE	ADDI- TIONAL FEES
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X40=	<input type="checkbox"/>	OR X80=	<input type="checkbox"/>
+135=	<input type="checkbox"/>	OR +270=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	OR TOTAL	0

RATE	ADDI- TIONAL FEES	RATE	ADDI- TIONAL FEES
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X40=	<input type="checkbox"/>	OR X80=	<input type="checkbox"/>
+135=	<input type="checkbox"/>	OR +270=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	OR TOTAL	0

RATE	ADDI- TIONAL FEES	RATE	ADDI- TIONAL FEES
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X40=	<input type="checkbox"/>	OR X80=	<input type="checkbox"/>
+135=	<input type="checkbox"/>	OR +270=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	OR TOTAL	0

AMENDMENT B	08/30/05	(Column 1)	(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total • 19	Minus .. 20	= 0
		Independent • 2	Minus ... 3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.